

OFFICE OF THE DEAN - STUDENT REFERRAL FORM

75747

VALLEY VIEW PUBLIC SCHOOLS COMMUNITY UNIT 365U Incident Report Of Student Misconduct	Name of Student: Roger Coronado	Date and Time of Incident: 2/4/08
Parent/Guardian: (Name/Address/Telephone No.) 213 Bedford Rd - 60440	Age: Notation:	Grade: 5B-6A
Date/Time Contacted: 030-209-1724 @ 8:30	Notation: Rogerio Coronado 630-963-9090 2/7/08	

DESCRIPTION OF INCIDENT INVOLVING STUDENT MISCONDUCT

Roger was seen by myself posturing with a large group in the cafeteria who were flashing gang signs at a group of gangster Disciples.

STUDENT'S SECTION: The above offenses have been explained to me and I have had the opportunity to respond to them; my signature shall not be taken as an admission of guilt of the offense(s) alleged. Further, should I be externally suspended from school, I understand I may not enter upon the property of the Valley View Schools, during the period of suspension, unless and until appropriate authorization is first obtained.

Student's Signature: Roger Coronado

Date:

Action Taken By Faculty Member

() Teacher's Detention(s): _____
 () Personal Conference with Student: _____
 () Parent Contacted By Telephone: _____
 () Letter Sent Home: _____

Referring Faculty Member:

T. Gavin

#15

Action Taken By Dean's Office

<input checked="" type="checkbox"/> Student Conference	<input type="checkbox"/> Detention(s) Issued	Number of: _____
<input checked="" type="checkbox"/> Parent Conference	<input type="checkbox"/> Int. Adjust. Center	Total Days: _____
<input type="checkbox"/> B.I.C.	<input checked="" type="checkbox"/> External Suspension	Total Days: <u>10</u>
<input type="checkbox"/> _____	<input type="checkbox"/> Saturday Detention	Date: _____
<input type="checkbox"/> _____	<input checked="" type="checkbox"/> Expulsion Candidate	Admin Council: _____

IA/Extr Date:

From: 2/27/08

IA/Extr Date:

Thru: 2/21/08

Return to Classes:

On: 2/22/08

DEAN'S SUMMARY:

20-D Fighting Mob Action40-B. Subversive Organization
School Board Policy 7:194 sec. 2NOTICE TO
PARENTS
OR
GUARDIAN

1. The purpose of this is to inform you of a disciplinary incident involving your child.
2. You are urged to support the action taken by the teacher/Dean and to cooperate with the corrective action initiated today.
3. This Incident Report has been reviewed with your child, as indicated by his/her signature above, and the above indicated disciplinary action has been imposed. If you have any questions please call the Dean.

Dean's Signature: J. NettDate: 2/7/08

DISTRIBUTION	WHITE	YELLOW	PINK	GOLDENROD
	Office of the Dean	Parents/Guardian	Referring Teacher	Student's Counselor

EXHIBIT

A